Vancouver CoastalHealth

TRAUMA · EMERGENCY · GLOBAL SURGERY · VANCOUVER GENERAL HOSPITAL

Abdominal Blunt Trauma

LEGEND

Decision Point	
Selection	
Diagnostic Step	
Action Item	

Hemodynamically unstable?

No

Yes

CT Abdo/Pelvis

Damage Control Resuscitation ⚠️

⚠️
- Permissive Hypotension
- 1:1:1 Transfusion
- Limit Crystalloids
- TXA

Organ Injuries and/or free fluid

eFAST

No → **Observe**

Yes

Discharge if GCS 15 asymptomatic and no other signs of trauma

Possible free fluid?

No

Yes

Repeat Primary eFAST, X-rays, CT ⚠️

⚠️
CXR
Pelvic CR
C-Spine XR
CT Unstable
RIPIT

Consider REBOA if in shock

Solid Organ Injury

Cause of HD instability remains unexplained?

Refer to specific organ guideline

No → **Treat accordingly**

Yes

Free fluid and no solid organ injury

Hollow viscous organ injury

Positive Findings from serial exams or signs of hollow viscous injury

Laparaotomy

No → **Observe**

Yes

OR Laparotomy

Hoff WS, Holevar M, Nagy KK, Patterson L, Young JS, Arrillaga A, et al. Practice abagement guidelines for the evaluation of blunt abdominal trauma: The EAST practice management guidelines work group. Journal of Trauma. 2002. pp. 602-15

Benjamin E, Cho J, Reines G, et al. Negative CT can safely rule out clinically significant intra-abdominal injury in the asymptomatic patient after blunt trauma. Journal of Trauma 2018. 84(1): 128-132.